

**REQUEST FOR INFORMATION**  
Assaultive and Sexual Offender Treatment Programs  
March 2008

**SECTION I – BACKGROUND**

**I-A PURPOSE**

Michigan Department of Corrections (MDOC) seeks information from experts in the treatment of prisoners who are at risk for committing violent or sex offenses. MDOC has established programs for the treatment of such offenders, commonly referred to as the Assaultive Offender Program (AOP) and Sexual Offender Program (SOP). However, as part of its effort to redesign the prisoner healthcare system, MDOC seeks information regarding how these programs might be redesigned to more effectively match offenders with treatment options, deliver the appropriate treatment ‘dose’ within the appropriate time span, and ensure treatment continues in the community after release. Any organization, state or federal agency, university, non-profit agency, or other knowledgeable party with expertise in the field of assessment and treatment of offenders is invited and encouraged to respond to any or all of the RFI questions listed below.

**I-B ISSUING OFFICE**

This RFI is issued by the Michigan Department of Corrections.

All communications concerning this request must be addressed to:

**Lia Gulick, Manager Financial Services**  
MDOC, Bureau of Fiscal Management  
Grandview Plaza  
Phone: 517-241-9902  
Email: [gulickll@michigan.gov](mailto:gulickll@michigan.gov)

**I-C COST LIABILITY**

The State of Michigan assumes no responsibility or liability for costs incurred by the respondent from this RFI and any subsequent Request for Proposal (RFP).

**I-D DISCLOSURE**

All information in a respondent’s response and any Contract resulting from this RFI is subject to the provisions of the Freedom of Information Act, 1976 Public Act No. 442, as amended, MCL 15.231, *et seq.*

## **I-E    NON INFRINGEMENT/COMPLIANCE WITH LAWS**

The respondent warrants that in performing the services called for by this RFI it will not violate any applicable law, rule, or regulation, any contracts with third parties, or any intellectual rights of any third party, including but not limited to, any United States patent, trademark, copyright, or trade secret.

## **SECTION II – WORK STATEMENT**

### **II-A   PROGRAM OVERVIEW**

#### **1.   GENERAL**

The State of Michigan is requesting written information from experts in this treatment area as a first step in its effort to redesign risk reduction programs for sex offenders and other violent offenders.

Currently, there are 11,050 prisoners identified as potential AOP participants and 5,071 prisoners identified as potential SOP participants. This includes all custody levels. As of 2/1/08 there were 1,606 prisoners enrolled in the AOP and 762 prisoners enrolled in the SOP.

The MDOC Psychological Services Unit (PSU) provides treatment to violent offenders and sex offenders through the AOP and SOP, respectively. These programs enroll offenders based on their instant offense/s or pre-sentence investigation report crime descriptions. Treatment takes place through group therapy sessions conducted twice per week for 1 ½ to 2 hours for six months. Each group includes approximately 10 offenders, and therapists follow a cognitive behavioral, relapse prevention model. Following voluntary or involuntary early termination or upon satisfactory program completion, offenders receive a Therapy Termination Report detailing their progress. These reports are used by the Parole Board as part of their decision making process.

Respondents are invited to respond in any or all of the following areas. Respondents are also invited to provide additional related information not specifically addressed below. Information is requested regarding:

- A. Assessment of offenders to determine the appropriate scope, mode, “dosage,” and duration of treatment.
- B. Treatment options both while in prison and post-incarceration for offenders who are at risk for committing future violent or sex offenses.
- C. Case management for offenders during and post-incarceration.
- D. Program evaluation methods, tools, and outcomes.

- E. Managing electronic records that have the capacity to meet the documentation needs of AOP/SOP.
- F. Data needed to design a program specific to the needs of MDOC.

## 2. 2. TASKS

### A. *Assessment Instruments*

- 1) Please describe what you consider to be the ‘state of the art’ in assessing assaultive and sexual offenders prior to, during, and post-treatment.
  - i. What assessment instruments are available, when and how are they used, and what are their strengths and limitations?
  - ii. How can assessment results be used to match offenders with treatment or to identify offenders who are not in need of treatment?
  - iii. How are these assessments to be used with special populations of offenders?
  - iv. What assessment results could be provided or used by the parole board to determine suitability for release on parole supervision?
  - v. Describe the process for periodically assessing dynamic risk factors while under parole supervision.

### B. *Treatment Programs for Offenders at Risk of Committing Violent and Sex Offenses*

- 1) Please describe evidence-based treatment models, specific programs, and/or therapeutic approaches for use with offenders during incarceration and after release on parole supervision that are at risk for committing future violent and/or sex offenses.
  - i. Include each programs attention to:
    - 1. Principles of risk
    - 2. Principles of need
    - 3. Principles of responsivity
    - 4. Principles of dosage and intensity
  - ii. Summarize the research on each program’s effectiveness in reducing offender risk
  - iii. Define the target population and assessment protocol for each program
  - iv. Describe the qualifications and training needs for staff to deliver each program
  - v. Describe how each program measures its effect on an individual’s progress over the course of treatment.
  - vi. Describe how each program measures risk reduction following the completion of the program

- vii. Describe each program's approach to relapse prevention planning
  - viii. Summarize any studies that document the cost/benefit analysis of the program.
- 2) What resources would be required to adopt the approach with the strongest evidence of effectiveness?
  - i. Propose a system to manage the programming process to ensure that each individual received the appropriate level of intervention for his or her risk and needs.
    - 1. What quality assurance methods should be in place? Include a quality assurance plan to monitor and improve program fidelity within the proposed management structure.
    - 2. How should the program be staffed?
  - ii. Summarize any literature documenting cost/benefit analysis of the proposed management system.

C. *Collaborative Case Management*

- 1) Describe a collaborative case management system that would link offenders to the appropriate intervention.
- 2) Describe how offenders would be referred into the program as indicators of risk and need emerge during incarceration or following release.
- 3) Describe the treatment progress reports or termination reports that would be used to determine suitability for release on parole supervision.
- 4) Describe the process for linking offenders into community-based treatment upon release.
- 5) What information should be provided to community partners regarding the offender or the AO/SO program?
- 6) Describe how staff should incorporate relapse prevention planning and ongoing assessment into the transition process and supervision strategy for each offender to ensure continuity of care.

D. *Program Evaluation*

- 1) Please describe how you would design and implement an ongoing evaluation of the programming design described above.
  - i. What data would you collect from program participants?
  - ii. How would you determine the program's effectiveness with respect to preventing re-offending?
  - iii. How would you define and measure offenders' short-term and long-term outcomes?
  - iv. What evaluation design would you utilize?

E. *Managing Electronic Records*

- 1) The MDOC must track assaultive and sex offenders as they enter the system and are placed in treatment. What electronic systems are currently in use for tracking offenders who need treatment and ensuring that offenders are matched with therapists or therapy groups in an efficient manner?
- 2) Please describe existing electronic records systems that have the capacity to meet the documentation needs of AO/SO programs.
  - i. What data are documented?
  - ii. How easily can the program be modified to meet the unique needs of MDOC?

F. Data

- 1) A data sheet is provided with the RFI as Attachment A. What additional data would you need to determine the program needs?

G. *Additional Information*

- 1) Is there additional pertinent information you would like to provide not covered in the sections listed above?

3. PRIOR EXPERIENCE

Respondents shall specify prior experience, education, or training relevant to this RFI.

## SECTION III – SUBMISSION INFORMATION

### III-A QUESTIONS

Additional Questions concerning the specifications contained herein are to be submitted in writing, no later than 3:00 pm **on April 11, 2008** to:

**Lia Gulick, Manager Financial Services**  
 MDOC, Bureau of Fiscal Management  
 Email: [gulickll@michigan.gov](mailto:gulickll@michigan.gov)

All questions are to be put in writing and must be **submitted electronically** and sent as an attachment in MS Word 97 or Rich Text Format (RTF). Answers to questions will be emailed to all potential respondents and posted on the MDOC website by close of business on April 16, 2008. The State may not be able to answer questions received after 3:00pm on April 11, 2008.

### III-B INFORMATIONAL MEETING

An informational meeting is scheduled for April 8, 2008 in Lansing, Michigan. The meeting will be held at the Capital commons Building, Room A/B from 9:00am to 12:00pm. The meeting will include a presentation of the MDOC's

AOP/SOP and a question and answer session. Please RSVP to Lia Gulick at [gulickll@michigan.gov](mailto:gulickll@michigan.gov) no later than Thursday, April 3, 2008.

### **III-C ORAL PRESENTATION**

Some respondents may be invited back for individual oral presentations. Presentations will be scheduled after receipt and review of written proposals. The tentative dates for oral presentations are May 12-16, 2008.

### **III-D ECONOMY OF PREPARATION**

Each proposal should be prepared simply and economically, providing a straightforward, concise description of the respondent's recommendations to meet the needs of the RFI.

## **SECTION IV – INFORMATION REQUIRED FROM RESPONDENTS**

The respondent's recommendations are to be submitted in the format outlined below. There should be no attachments, enclosures, or exhibits other than those considered by the respondent to be essential to a complete understanding of the proposal submitted.

### **IV-A BUSINESS ORGANIZATION**

State the full name and address of your organization and, if applicable, the branch office or other subordinate element that will perform, or assist in performing, the work hereunder.

### **IV-B PROPOSAL CONTENTS**

The Michigan Department of Corrections is requesting proposals from interested respondents that shall include the following:

- Response to information requested under "Tasks" in Section II-A part 2.
- Respondent Qualifications and Experience
- List additional comments and ideas

### **IV-C RESPONDENT'S CONTACT**

Include the name, telephone number, and email address of the person(s) in your organization who will serve as the authorized contact person.

#### **IV-D PROPOSAL SUBMITTAL**

Respondent proposals shall be **submitted electronically** in a Word and/or Excel Format. All documents and data must be created using tools that are compatible with the Microsoft Office Suite 97 standard desktop tools, without need for conversion.

**Michigan Department of Corrections, Bureau of Fiscal Management must receive your response no later than 3:00pm on April 25, 2008.**

## Attachment A

### SEX OFFENDER FACT SHEET Michigan Department of Corrections

#### Felony Court Dispositions & Prison Intake

**3,743** criminal court dispositions for sex crimes in Michigan in 2004

Prison commitment rate for sex crimes: **55.7%** (compared to 22.6% for all crimes)

Prison admissions in 2005 for sex crimes = **1,139** (11% of all prison intake)

#### Prison Population

**11,889** inmates are serving active sentences for sex crimes (**23.6%**)

- **3,531 (29.7%)** will reach the earliest release date (ERD) within 5 years
- **5,324 (44.8%)** are already past the ERD

Of those past the ERD, **2,304 (43.3%)** will discharge on the max within 5 years

Average cumulative minimum term for sex offenders in prison = **9.7 years**

Average cumulative maximum term for sex offenders in prison = **25.7 years** (excluding life)

Sex offenders serving life = **341**

Sex offenders discharged on the maximum sentence in 2005 = **451**

The most common inmate sex crimes: CSC 1<sup>st</sup> degree (**39%**), 2<sup>nd</sup> degree (**26%**), 3<sup>rd</sup> degree (**22%**)

#### Parole Population

Sex offender parole approval rate in 2005 = **13.8%** (compared to 54.7% for all crimes) NOTE:  
rate  
declined to 10.3% in 2006

Sex offenders paroled in 2005 = **759**

**1,118** parolees are serving active sentences for sex crimes (**7.2%**)

Average cumulative minimum term for sex offenders on parole = **4.3 years**

On average, **7.6 years** remain on the maximum sentence in the event of parole failure

The most common parolee sex crimes: CSC 3<sup>rd</sup> degree (**39%**), 2<sup>nd</sup> degree (**28%**), 1<sup>st</sup> degree (**19%**)



## Attachment A Page 2

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| Parole Outcomes (baseline data – 1998 paroles) |
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Paroled sex offenders successfully remaining in the community two years after release = **71.3%**  
(versus 51.3% for all parolees)

Parole violator new sentence rate for paroled sex offenders = **2.4%** (versus overall rate of 12.3%)

(As demonstrated by the low sex offender parole approval rate and the comparatively shorter sentences for paroled sex offenders, the parole board releases only sex offenders who are perceived to be low risk)